PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/019,067-Conf. #7795 **Application Number** FEE TRANSMITTAL June 28, 2002 Filing Date Mats PAULSSON First Named Inventor For FY 2008 **Examiner Name** G. W. Counts Applicant claims small entity status. See 37 CFR 1.27 1641 Art Unit **HLZ-001USRCE TOTAL AMOUNT OF PAYMENT** 1,520.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Money Order Credit Card None Other (please identify): Check Lahive & Cockfield, LLP 12-0080 X Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of x | Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES FILING FEES **EXAMINATION FEES** Small Entity **Small Entity Small Entity** Fees Paid (\$) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) <u>Fee (\$)</u> Fee (\$) 210 105 Utility 310 155 510 255 Design ' 210 105 100 50 130 65 80 210 105 310 155 160 Plant 255 620 310 155 510 310 Reissue Provisional 210 105 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 Fee Paid (\$) **Multiple Dependent Claims Total Claims** Extra Claims Fee (\$) Fee Paid (\$) - 20 = HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Extra Claims - 3 = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) (round up to a whole number) x - 100 = _ 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37 ... 405.00 2255 Extension for response within fifth month 1,115.00 SUBMITTED BY Registration No. (Attorney/Agent) 60.760 (617) 994-0869 Signature Telephone Name (Print/Type) August 22, 2008 Date

PTO/SB/17 (10-07)
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Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08.		Complete if Known				
Fees pursuant to the Consolidated Approp	Application Nu	Application Number 10/019		019,067-Conf. #7795		
FEE TRANS	Filing Date		June 28, 2002			
For FY 20	First Named In		Mats PAULSSON			
101112	Examiner Nam	Examiner Name G. W. Count				
X Applicant claims small entity star	Art Unit	Art Unit 1641				
TOTAL AMOUNT OF PAYMENT (\$) 1,520.00		Attorney Docke	Attomey Docket No. HLZ-00		1USRCE	
METHOD OF PAYMENT (check	all that apply)		· ·			
Check Credit Card Money Order None Other (please identify):						
x Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES					
F		EARCH FEES		INATION FEES		
Application Type Fee (S	Small Entity S) Fee (\$) Fee	Small Entity (\$) Fee (\$)	Fee (\$	Small Entity (5) Fee (\$)	Fees F	Paid (\$)
Utility 310	_		210	105		
Design 210	105 100	50	130	65		
Plant 210		155	160	80		
Reissue 310		255	620	310		
Provisional 210		0	0	0		
2. EXCESS CLAIM FEES			_			Small Entity
Fee Description					Fee (\$)	Fee (\$)
Each claim over 20 (including Reiss	sues)				50	25
Each independent claim over 3 (inc	luding Reissues)				210	105
Multiple dependent claims	•				370	185
Total Claims Extra Claims	Paid (\$)		Multiple Depende	ent Claims		
	x =		:	<u>Fee (\$)</u>	Fee Paid (\$	<u>5)</u>
HP = highest number of total claims paid for, if greater than 20.						
Indep. Claims Extra Claims	ree (\$)	Paid (\$)				
1 - 3 = HP = highest number of independent claim						
3. APPLICATION SIZE FEE	- para rent in greener and in					
If the specification and drawings e	xceed 100 sheets of paper	er (excluding elec	tronically	filed sequence or	computer	
listings under 37 CFR 1.52(e)),	the application size fee	due is \$260 (\$130	for small			0
sheets or fraction thereof. See						
Total Sheets Extra Shee		round up to a w	-		<u>Fee</u> =	Paid (\$)
4. OTHER FEE(S)		(round up to a m			Fees	Paid (\$)
Non-English Specification, \$13	0 fee (no small entity di	scount)				
Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37					405.00	
2255 Extension for response within fifth month 1,115.00						
SUBMITTED BY						
gnature Registration No.		60,76	0 Telephone	(617) 994-0869		
Name (Print/Type) Jill Go/ny Sloper				Date	August 2	2, 2008